

Division of Services for the Deaf and Hard of Hearing

Utah Interpreter Program

5709 South 1500 West / Taylorsville UT 84123-5217 801.263.4861

Sponsor / Presenter Application to Conduct Interpreter Workshop

Return this application to uip@utah.gov

Submitted By:		Date:	
Email:		Phone:	
Name of Workshop:			
Date of Workshop:	Workshop Ho	urs/CEH Requested: _	
Workshop Time: to		_	
Sponsored By:	_ Workshop Co	st: \$	
Are CEH credits awarded for partial attendance?	Yes	_ No	
If yes, how many hours are required for partial credit?		-	
Brief Workshop Description:			
Presenters:			
Workshop Location (including room, if applicable):			
Would you like verification of approval emailed to you?	?Y	esNo	
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Please Note: In order for participants to receive CEH credit, the attendance roster must be returned within 30 days following the workshop.

Equal Opportunity Employer/Program

Auxiliary aids and services are available upon request to individuals with disabilities by calling (801) 526-9240. Individuals with speech and/or hearing impairments may call Relay Utah by dialing 711.

Spanish Relay Utah: 1-888-346-3162